24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	IDENTIFICATION NUMBER ▼
Warrior PAC	C00619445
Check if 24-hour report 48-hour report New report Amends report filed on	/ D = D / Y = Y = Y
Full Name of Payee Digital Triumph	olic Distribution/Dissemination
Mailing Address 1048 Irvine Avenue Amount	08 2016
Suite 506	
	4216.11 n ID : SE.4216 bursement or Obligation
Purpose of Expenditure Automated Calls Category/ Type 004 12	08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	House District: 00
KENNEDY, JOHN NEELY, , , Oppose President	Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disbursement For: 2016 Other (s	Primary General specify) ▶ Runoff
Full Name of Payee Digital Triumph Date of Put	blic Distribution/Dissemination
Mailing Address 1048 Irvine Avenue Amount	2010
Suite 506	101011
	4216.11 ID: SE.4217 bursement or Obligation
Purpose of Expenditure Automated Calls Category/ Type 004 12	08 / 2016
Name of Federal Candidate X Support Office Sought:	₩ House District: 03
HIGGINS, CAPTAIN CLAY, , , Oppose President	Senate State: LA
Calendar Year-To-Date Per Election for Office Sought Disbursement For: 29900.83 Other (Specify) Primary General Specify) Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	8432.22
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	7 1 7 1 1 1 1 1
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooper with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reparty committee) any political party committee or its agent.	
San Luis, Robert, , , [Electronically Filed] Date 12 09	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 2 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	IDENTIFICATION NUMBER ▼
Warrior PAC	C00619445
	000013443
Check if X 24-hour report 48-hour report New report Amends report filed on	/ D = D / Y = Y = Y = Y
Full Name of Payee Date of Pub	lic Distribution/Dissemination
Digital Triumph	08 2016
Mailing Address 1048 Irvine Avenue Amount	
Suite 506	0422.22
City State Zip Code Newport Beach CA 92660 Transaction	8432.22 n ID : SE.4218
Date of Disk	oursement or Obligation
Purpose of Expenditure Automated Calls Category/ Type 004 12	08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office Sought:	✗ House District:03
ANGELLE, SCOTT MR., , ,	Senate State: LA
Calendar Year-To-Date Disbursement For:	Primary General
Per Election for Office Sought 38333.05 2016 X Other (s	specify) Runoff
	olic Distribution/Dissemination
Digital Triumph	09 2016
Mailing Address 1048 Irvine Avenue	20.0
Suite 506	
City State Zip Code	6842.07
	ID: SE.4214 bursement or Obligation
Purpose of Expenditure Digital Advertising Category/ Type 004 12	09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	District 02
HIGGINS CAPTAIN CLAY	House District: 03
Oppose President	Seriale State.
Calendar Year-To-Date Per Election for Office Sought Disbursement For: 2016 Cother (s	Primary General specify) ▶ Runoff
(a) SUBTOTAL of Itemized Independent Expenditures	15274.29
(b) SUBTOTAL of Unitemized Independent Expenditures	
(a) TOTAL Independent Evpanditures	
(c) TOTAL Independent Expenditures	7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in coopera with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reparty committee) any political party committee or its agent.	
San Luis, Robert, , , [Electronically Filed] Date 12 09	2016
Signature Date 12 09	2010

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 3 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Warrior PAC	C C00619445
	C 00019443
Check if 24-hour report 48-hour report New report Amends report filed on	M / D = D / Y = Y = Y
	of Public Distribution/Dissemination
	12 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1048 Irvine Avenue	nt
Suite 506	
City State Zip Code	6842.07
Date of	action ID : SE.4215 of Disbursement or Obligation
Purpose of Expenditure	12 09 2016
Name of Federal Candidate Support Office Sough	t: K House District: 03
ANGELLE, SCOTT MR., , ,	Tribude Bietriet.
Calendar Year-To-Date Disbursemen	
Per Election for Office Sought 45175.12 2016	ther (specify) ▶Runoff
Full Name of Payee Date of	of Public Distribution/Dissemination
	/ D D / Y T Y T Y
Mailing Address	
Amou	nt
City State Zip Code	
Date	of Disbursement or Obligation
Purpose of Expenditure Category/	/ D D / Y Y Y Y
Type	
Name of Federal Candidate Support Office Sough	t: House District:
Oppose Preside	ent Senate State:
Calendar Year-To-Date Disbursemen	t For: Primary General
Per Election for Office Sought	other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	6842.07
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	20540.50
(b) Total independent Experience	30548.58
Under penalty of perjury I certify that the independent expenditures reported herein were not made in c with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if party committee) any political party committee or its agent.	
San Luis, Robert, , , [Electronically Filed] Date 12	09 / 2016
Signature	